2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

Principal Place of Business

11111 WILCREST CREET. SUITE 250

F02000002484

Mailing Address

11111 WILCREST CREET. SUITE 250

1. Entity Name

AEGIS WHOLESALE CORPORATION



FILED Mar 27, 2003 8:00 am Secretary of State

03-27-2003 90115 005 ***150.00

| - |
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| HOUSTON IX | 77042 | | HOUSTON IX //042 | | | | | | | | |
|---|--------------------|---|-------------------------------|-------------------------------|--|--|---|----------------|----------------------------|--|--|
| 2. Principal Pl | ace of Busin | 988 | 3. Mailing Address | | | | | | IIII CIENIUE | | |
| · | | | | 50 Briarpark Drive | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | M OF CANADA OF THE CANADA OF THE CANADA | | | | | |
| | | Suite 400 | * ' ' | | CHECK HERE IF MAKING CHANGES | | | | | | |
| City & State | | | City & State | | | FEI Number 77 050000 | n | Ap | plied For | | |
| | | | Houston, Texas | | | 77-058988 | 5 | No | t Applicable | | |
| Zip | | Country | Zip Country | | | Cardifficate of Chatric Donison | | 8.75 Add | litional | | |
| 77042 | j | US | 77042 | 77042 US | | | 5. Certificate of Status Desired Fee Required | | | | |
| - | | and Address of Current R | | | 7. Name and Address of New Registered Agent | | | | | | |
| | | | | Name | Name | | | | | | |
| C T CORPORATION SYSTEM | | | | 0: 14 | 0 111 (0 0 0 11 (11 11 11 11 11 11 11 11 11 11 11 11 | | | | | | |
| 1200 SOU | TH PINE IS | LAND ROAD | | Street A | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | ON FL 3332 | | | | | | | | | | |
| FLANTAIN | DIN FL 3334 | :4 | | | | | | | | | |
| | | | | City | | | FL | Zip Code | Э | | |
| 9 The shows | named ontitu | submits this statement for | the purpose of changing its r | ngistored office o | registered ar | gent or both in the State of FI | lorida I am fa | miliar with | and accent | | |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. | | | | | | | | | | | |
| SIGNATURE _ | Signature, typed o | or printed name of registered agent an | d title if applicable. (NOTE: | Registered Agent signat | ure required when r | reinstating) | DATE | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State | | | | | | Election Campaign Fi Trust Fund Contribution | on. | Added | 0 May Be to Fees | | |
| 10. | ***** | OFFICERS AND D | IRECTORS | 11. | .Al | DDITIONS/CHANGES TO OF | FICERS AND | DIRECTOR | S IN 11 | | |
| TITLE | PD | | ☐ Delete | TITLE | D | | | X Change | ☐ Addition | | |
| NAME | | N, D. RICHARD | | NAME | D. Rick | hard Thompson | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | Crest Green, Suite TX 77042 | 250 | STREET ADDRESS CITY-ST-ZIP | | riarpark Drive, n, Texas 77042 | Suite 4 | 100 | | | |
| TITLE | V | ·········· | ☐ Delete | TITLE | PD | ., 201100 //4/1 | | X) Change | Addition | | |
| NAME | • | N, MICHAEL M | ☐ Delete | NAME | | l M. Massella | | Za ondingo | | | |
| STREET ADDRESS | | CREST GREEN, SUITE | 250 | STREET ADDRESS | | riarpark Drive, | Suita / | inn | | | |
| CITY-ST-ZIP | | TX 77042 | | CITY-ST-ZIP | | n, Texas 77042 | Surce - | 100 | | | |
| TITLE | VSD | *************************************** | □ Delete | TITLE | VS | iii ichab 77042 | | X Change | Addition | | |
| NAME | BALOG, M | ICHAEL C | □ Delete | NAME | | 1 C. Balog | | [25] Officings | | | |
| STREET ADDRESS | | CREST GREEN, SUITE | 250 | STREET ADDRESS | | riarpark Drive, | Codes / | .00 | | | |
| CITY-ST-ZIP | HOUSTON | | | CITY-ST-ZIP | Houston | n, Texas 77042 | Surre 2 | 100 | | | |
| TITLE | VTD | 177.77012 | ☐ Delete | TITLE | VTD | 11, 16x48 //042 | | X Change | ☐ Addition | | |
| NAME | MARVIN, S | THART O | ∟ Delete | NAME | 4 | D. Marvin | | (A) Onlings | | | |
| STREET ADDRESS | | CREST GREEN, SUITE | 250 | STREET ADDRESS | | | Cuit to / | .00 | | | |
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| NAME | | | | NAME | | | | | | | |
| STREET ADDRESS | | | | STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | _ | | | CITY-ST-ZIP | | | | | | | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Michael C. Balog, EVP/Secretary 3/24/03 713:78770100 Date

Daytime Phone #